

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		2				
4		2				
5		2				
6		2				
7	1					
8		1				
9		2				
10		2				
11		2				
12		2				
13	1					
14	1					
15		1				
16	1					
17		1				
18		2				
19		2				
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45						
46						
47						
48						
49						
50						
TOTAL IND.	5					
TOTAL DEP.	19					
TOTAL CLAIMS	24					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS